PART B - FEE(S) TRANSMITTAL

Complete and and this form, together with applicable fee(s), to: Mail APR 0 1 2005

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (703) 746-4000

INSTRUCTURES: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where appropriate All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 34444 01/07/2005 UNIVERSITY OF VIRGINIA PATENT FOUNDATION

1224 WEST MAIN STREET, SUITE 1-110 **CHARLOTTESVILLE, VA 22903**

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

Sue_Ann_Ca	rr	(Depositor's name
-the	mu an	(Signature
March 30,	2005	(Date
n mon	LAMBORA INC. DO CHEM AND	001797914.MO11110

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/069,674	02/22/2002	· Boris P. Kovatchev	00438-02	3616

TITLE OF INVENTION: METHOD AND APPARATUS FOR PREDICTING THE RISK OF HYPOGLYCEMIA

		3-						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	YES	\$700		\$0	\$700	04/07/2005		
EXAMINER		ART UNIT		CLASS-SUBCLASS]			
ASTORINO,	ASTORINO, MICHAEL C			600-300000	-			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 1. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. 1. The Address form PTO/SB/122) attached. 1. The Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) University of Virginia Patent Foundation, Charlottesville, Virginia								
Please check the appropriate assignee category or categories (will not be printed on the patent) : 🔲 Individual 🖾 Corporation or other private group entity 🛄 Government								
4a. The following fee(s) are	enclosed:	4b	. Payment of	` '				
	Issue Fee							
	Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached.							
Advance Order - # of Copies								
5. Change in Entity Status	(from status indicated above	e)						
a. Applicant claims S	MALL ENTITY status. See	37 CFR 1.27.	b. Appli	cant is no longer claiming SMA	LL ENTITY status. See 37 C	CFR 1.27(g)(2).		
The Director of the USPTO NOTE: The Issue Fee and P interest as shown by the rec	is requested to apply the Issu bublication Fee (if required) words of the United States Pate	ue Fee and Publica vill not be accepted ent and Trademark	tion Fee (if a I from anyon Office.	ny) or to re-apply any previous e other than the applicant; a reg	ly paid issue fee to the applications attorney or agent; or t	ation identified above. he assignee or other party in		
Authorized Signature	Re Doch	<u>. </u>		_ Date N	March 30, 2005			

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Typed or printed name Robert J. Decker

Registration No. _



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Boris P. Kovatchev, et al.

Customer No. 34444

Serial No.

10/069,674

Art Unit: 3736

Filed:

February 22, 2002

Examiner: Michael C. Astorino

Title:

Method and Apparatus for Predicting the Risk of Hypoglycemia

Certificate of Mailing Under 37 CFR §1.8

I hereby certify that this correspondence is being deposited with the United States Postal Service using First Class Service under 37 C.F.R. § 1.8 on the date indicated below and is addressed to Mail Stop Issue Fee, Commissioner for Patents, PO Box 1450, Alexandria, VA 22313-1450.

Date: March 30, 2005

TRANSMITTAL OF ISSUE FEE AND FORMAL DRAWINGS

Mail Stop Issue Fee Commissioner for Patents PO Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith for the above-referenced application, please find Issue Fee Transmittal (PTOL-85).

The Commissioner is hereby authorized to charge the \$700 fee for this submission to Deposit Account No. 50-0423 as well as charge any additional fee due.

Respectfully submitted,

Date: March 30, 2005

Robert J. Decker

Registration No. 44,056

University of Virginia Patent Foundation 1224 West Main Street, Suite 1-110 Charlottesville, VA 22903 Telephone: (434) 924-2640

Fax: (434) 924-2493